## GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS REQUEST FOR DRAWDOWN OF NSP FUNDS

## **DRAW SUMMARY**

# This form must be submitted with NSP DD form(s) 1\* \* except if Administrative funds only are being requested.

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1. Grantee Infor	mation:								
Recipient	Grai	Grant Gra							
(Name):			Nun	nber		Draw numb	er:		
	Name a	nd telephone	number of the person	to contact if the	nere are any	questions about this drawdow	n:		
Name:									
2. DRAWDOWN INFORMATION - All draw requests must be submitted with supporting documentation for requests									
A. Activity #		B. vard Budget	C. Amount Drawn To Date	D Balance Av Drawc	ailable for	E. Amount of Drawdown Requested (Total amount requested for each project included on attached NSP DD 1 Forms)	F. Balance Remaining after Drawdown (Subtract Amount requested from balance available)		
	1								
	1								
	1								
TOTAL									
	mo								
3. Program Income  Please indicate the amount of Program Income (PI) received since the date of your last drawdown: \$  Leaving this blank certifies that no Program Income has been received. Please indicate the total cash on hand (including PI) in your NSP bank account as of the date of this drawdown: \$									
4. Certifications									
I hereby certify t			e is correct and th	nat this req	uest is in	accordance with the ter	rms and conditions		
of the above refe	renced g	grant.							
Authorized Signature Date Title									
							_		
Authorized Signature Date Title									
Below for DCA Use Only									
Date Received		Notes:							
Date of Wire									
Amount Approved		Reviewed By		Date	Approved By	<u> </u>	Date		

#### Instructions for completing REQUEST FOR DRAWDOWN OF NSP FUNDS DRAW SUMMARY

This form is designed to accompany REQUEST FOR DRAWDOWN OF NSP FUNDS FOR INDIVIDUAL PROJECT forms and SUMMARIZES the totals for all individual project forms submitted.

This form MUST be accompanied by individual project draw request forms unless the draw if for administration only.

**1. Grantee Information:** Insert Grant Recipient Name; DCA Assigned Grant Number; number of this draw request for overall grant (sequential); Name and contact phone number for person completing form.

### 2. Drawdown Information: Include entire budget for grant by activity number

Column A: Insert all approved NSP Activity Numbers for grant award.

Column B: Insert approved budget amount for each activity.

Column C: Insert amount drawn *prior* to this request for the activity.

Column D: Insert amount remaining in budget for this activity.

Column E: Insert amount requested for each activity on this drawdown.

Column F: Insert amount remaining in each activity after drawdown

Totals: sum of amounts listed above in columns B, C, D, E and F.

- **3. Program Income information**: List all program income received since the last draw request (all program income must be used in accordance with NSP regulations). List cash on hand in bank account as of the date of the draw request (Cash on hand must be limited to \$5000 or less. Amounts above that must be expended within 3 days or returned to DCA. (See NSP Recipient Manual for additional information.)
- **4. Certifications:** Signature of TWO authorized officials (named on the Grant Award as authorized Signatories).

\*\*\*\*DOCUMENTATION OF AMOUNTS REQUESTED MUST BE ATTACHED TO THE DRAW REQUEST:\*\*\*
See instructions for completing REQUEST FOR DRAWDOWN OF NSP FUNDS FOR INDIVIDUAL PROJECT
For required documentation for other activities

Activity	<b>Documentation (copies) to submit</b>	Other documentation to retain in file
Administration	Only if requested by DCA	Invoices for payment requests
		(subrecipients, contracted administrators)
		Timesheets local staff